Image# 13962740936 PAGE 1 / 34

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

| | | | | Office Use Only |
|---|--|--|----------------------------|---|
| 1. NAME OF TY COMMITTEE (in full) | PE OR PRINT ▼ | Example: If typing, to over the lines. | ype 12FE4M5 | |
| American Academy of O | phthalmology Inc | Political Committee | (OPHTHPAC) | |
| | | | | |
| ADDRESS (number and street) | 655 Beach Street | | | |
| Check if different | | | | |
| than previously reported. (ACC) | San Francisco | | L CA | 94109 |
| 2. FEC IDENTIFICATION NUM | IBER ▼ C | ITY ▲ | STATE ▲ | ZIP CODE ▲ |
| C C00196246 | | IS THIS REPORT X (N) | OR AM | IENDED |
| 4. TYPE OF REPORT (Choose One) | Report | b 20 (M2) May | 20 (M5) Aug | 20 (M8) Nov 20 (M11) (Non-Election Year Only) |
| (a) Quarterly Reports: | | | | 20 (M9) Dec 20 (M12) (Non-Election Year Only) |
| April 15 | | or 20 (M4) Jul 2 | 0 (M7) Oct | 20 (M10) Jan 31 (YE) |
| Quarterly Report (Q1) July 15 Quarterly Report (Q2) | PRE-Election | Primary (12P) | General | |
| October 15 | Report for the: | Convention (12C | Special (| 12S) |
| Quarterly Report (Q3) January 31 Year-End Report (YE) | Flori | ion on | D / Y Y Y Y | in the State of |
| July 31 Mid-Year Report (Non-election Year Only) (MY) | (d) 30-Day POST-Election Report for the: | General (30G) | Runoff (3 | Special (30S) |
| Termination Report (TER) | | ion on | D / Y = Y = Y | in the State of |
| 5. Covering Period 05 | 01 2013 | through | 05 31 | 2013 |
| certify that I have examined this | Report and to the best of | of my knowledge and belie | f it is true, correct and | d complete. |
| Type or Print Name of Treasurer | Steven Rausch | | | |
| Signature of Treasurer Steven R | Rausch | [Electronically File | ed] Date 06 | 03 / 2013 |
| NOTE: Submission of false, erroneou | us, or incomplete informati | on may subject the person | signing this Report to the | ne penalties of 2 U.S.C. §437g. |
| Office Use Only | | | | FEC FORM 3X Rev. 12/2004 |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

05 2013 Report Covering the Period: 2013 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 292506.39 January 1, 2013 (b) Cash on Hand at 401097.92 Beginning of Reporting Period..... 320921.52 25710.25 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 426808.17 613427.91 6(a) and 6(c) for Column B)..... 37216.51 223836.25 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 389591.66 389591.66 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

| I. Receipts | COLUMN A | COLUMN B |
|--|-------------------|-----------------------|
| i. neceipts | Total This Period | Calendar Year-to-Date |
| . Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 10707.11 | 264772.04 |
| (i) Itemized (use Schedule A) | 18797.11 | 261772.91 |
| (ii) Unitemized | 3413.14 | 55648.61 |
| (iii) TOTAL (add | | |
| Lines 11(a)(i) and (ii)▶ | 22210.25 | 317421.52 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | 0.00 | |
| (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii), (b), and (c)) (Carry | | 047404.50 |
| Totals to Line 33, page 5)▶ | 22210.25 | 317421.52 |
| 2. Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | 0.00 |
| | 0.00 | 0.00 |
| B. All Loans Received | 0.00 | 0.00 |
| | | |
| Loan Repayments Received | 0.00 | 0.00 |
| 5. Offsets To Operating Expenditures | | |
| (Refunds, Rebates, etc.) | 0.00 | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 6. Refunds of Contributions Made | | |
| to Federal Candidates and Other | | |
| Political Committees | 3500.00 | 3500.00 |
| 7. Other Federal Receipts | | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 3. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| | 0.00 | |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| (c) Total Transfers (add To(a) and To(b)) D. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 25710.25 | 320921.52 |
| Total Fadaval Dagainta | | |
| Total Federal Receipts (subtract Line 18(c) from Line 19) | 25710.25 | 320921.52 |
| (Subtract Line To(o) Holli Line 13) | 20110.20 | 320921.32 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | | |
|---|----------------------------|-----------------------------------|--|--|--|
| . Operating Expenditures: — (a) Allocated Federal/Non-Federal | 10.00.1.00.00 | Jaionaa Tour to Date | | | |
| Activity (from Schedule H4) | | 0.00 | | | |
| (i) Federal Share | 0.00 | 0.00 | | | |
| (ii) Non-Federal Share | 0.00 | 0.00 | | | |
| (b) Other Federal Operating | | | | | |
| Expenditures | 216.51 | 1191.83 | | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ | 216.51 | 1191.83 | | | |
| Transfers to Affiliated/Other Party | | | | | |
| Committees | 0.00 | 0.00 | | | |
| Contributions to Federal Candidates/Committees and Other Political Committees | 35000.00 | 219000.00 | | | |
| Independent Expenditures | 0.00 | 0.00 | | | |
| (use Schedule E) Coordinated Party Expenditures | 0.00 | 0.00 | | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 | | | |
| Loan Repayments Made | 0.00 | 0.00 | | | |
| Loans MadeRefunds of Contributions To: | 0.00 | 0.00 | | | |
| (a) Individuals/Persons Other Than Political Committees | 2000.00 | 3644.42 | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | | | |
| (d) Tatal Contribution Beforeds | | | | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶ | 2000.00 | 3644.42 | | | |
| - | | | | | |
| Other Disbursements | 0.00 | 0.00 | | | |
| Federal Election Activity (2 U.S.C. §431(20)) | | | | | |
| (a) Allocated Federal Election Activity | | | | | |
| (from Schedule H6) (i) Federal Share | 0.00 | 0.00 | | | |
| _ | | 2.22 | | | |
| (ii) "Levin" Share | 0.00 | 0.00 | | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | | | |
| (c) Total Federal Election Activity (add | | | | | |
| Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 0.00 | 0.00 | | | |
| Total Disbursements (add Lines 21(c), 22, | | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 37216.51 | 223836.25 | | | |
| Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | | |
| from Line 31) | 37216.51 | 223836.25 | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 22210.25 | 317421.52 |
| 4. Total Contribution Refunds (from Line 28(d)) | 2000.00 | 3644.42 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 20210.25 | 313777.10 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 216.51 | 1191.83 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 8. Net Operating Expenditures (subtract Line 37 from Line 36) | 216.51 | 1191.83 |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR | FOR LINE NUMBER: | | | PAGE | | 6 | OF | 34 | |
|------------------|------------------|--|-----|------|-----|---|----|----|----|
| (check only one) | | | | | | | | | |
| × | 11a | | 11b | | 11c | | 12 | 2 | |
| | 13 | | 14 | | 15 | | 16 | 6 | 17 |

| | Statements may not be sold or used by any persible name and address of any political committee t | |
|--|--|---|
| NAME OF COMMITTEE (In Full) American Academy of Ophtha | Ilmology Inc Political Committee (C | PHTHPAC) |
| Full Name (Last, First, Middle Initial) Aaron Appiah | | Date of Receipt |
| Mailing Address 2280 Wednesday St | | 05 06 2013 |
| City | State Zip Code FL 32308-4387 | Transaction ID : F01079F5-8BA6-44B5-8 |
| Tallahassee | FL 32308-4387 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | 1 |
| Self | Ophthalmologist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 365.00 | |
| Full Name (Last, First, Middle Initial) Amin Ashrafzadeh | | Date of Receipt |
| Mailing Address 1741 Coffee Rd | | 05 06 2013 |
| City | State Zip Code | Transaction ID: 28A7488D-60B7-489C-8 |
| Modesto | CA 95355-2807 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | 1 |
| Self | Ophthalmologist | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) C. Thomas Beardsley | | Date of Receipt |
| Mailing Address 8 Medical Park Dr | | 05 10 2013 |
| City Asheville | State Zip Code NC 28803-2493 | Transaction ID : 3A52D04E-FB28-4F4A-8 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | - |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| SUBTOTAL of Receipts This Page (optional). | | 1865.00 |
| TOTAL This Period (last page this line number | er only) | |

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

34

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Robert Block Date of Receipt Mailing Address 12 Curtis St 2013 City Zip Code State Transaction ID: 4D5CA66148B821CEC3EF CT Meriden 06450-5900 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name (Last, First, Middle Initial) B. Beth Bruening Date of Receipt Mailing Address 3710 North Westshore Drive 05 80 2013 City State Zip Code Transaction ID: 300FDFFD-B6EC-4A92-A North Sioux City SD 57049 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Frank Burns Date of Receipt Mailing Address 13324 Shelbyville Rd. 15 2013 City Zip Code State Transaction ID: 00EECCBE-6BA7-42B5-A KY Louisville 40223 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 499 99 Other (specify) 1125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | 8 | OF | 34 | |
|------------------|----|---------|----|-----|------|-----|----|----|----|
| (cl | he | ck only | or | ıe) | | | | | |
| [| X | 11a | | 11b | | 11c | 12 | | |
| | | 13 | | 14 | | 15 | 16 | | 17 |

| Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may not be sold or used by any perso name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|--|--|---|
| NAME OF COMMITTEE (In Full) | | |
| | nology Inc Political Committee (OF | PHTHPAC) |
| / | | |
| Full Name (Last, First, Middle Initial) A. Edward Cherney | | Date of Receipt |
| Mailing Address 2311 Pierce Ave | | M = M / D = D / Y = Y = Y |
| Rm 2250 | | 05 02 2013 |
| City | State Zip Code | Transaction ID: 04A08EB6-DAAF-4C06-9 |
| Nashville | TN 37232-0025 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 99.094.0 104.10 0410 4 | |
| Other (specify) ▼ | 1000.00 | |
| | | |
| Full Name (Last, First, Middle Initial) Donald Cinotti | | Date of Receipt |
| Mailing Address 600 Pavonia Ave | | M = M / D = D / Y = Y = Y |
| 6th FI | | 05 01 2013 |
| City | State Zip Code | Transaction ID: 40BBD044-10FA-4284-B |
| Jersey City | NJ 07306-2932 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 2000.00 | |
| Full Name (Last, First, Middle Initial) 5. S. William William Clark | | Date of Receipt |
| Mailing Address 502 Isabella St | | Man / Dan / Yanyayay |
| SUZ ISADEIIA SI | | 05 15 2013 |
| City | State Zip Code | Transaction ID : 526BAFB8-53D9-4269-B |
| Waycross | GA 31501-3638 | Amount of Each Receipt this Period |
| FEC ID number of contributing | С | 208.33 |
| federal political committee. | | |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1041.65 | |
| | | 4700.00 |
| SUBTOTAL of Receipts This Page (optional) | <u> </u> | 1708.33 |
| TOTAL This Period (last page this line number | only) | 7 |

Use separate schedule(s) for each category of the Detailed Summary Page

| ı | FOR LINE | FOR LINE NUMBER: | | | 34 | | | |
|---|------------------|------------------|-----|----|----|--|--|--|
| | (check only one) | | | | | | | |
| | X 11a | 11b | 11c | 12 | | | | |
| | 13 | 14 | 15 | 16 | 17 | | | |

| | g the name and address of any political committee | |
|---|---|---------------------------------------|
| , , | nalmology Inc Political Committee (| OPHTHPAC) |
| Full Name (Last, First, Middle Initial) A. R. Doug Davis | | Date of Receipt |
| Mailing Address 30114 Torrey Pines Circl | | 05 05 2013 |
| City | State Zip Code | Transaction ID: 11DFA6E9-E798-4614-9 |
| Georgetown | TX 78628-1100 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | _ |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 1000.00 | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) 3. Aspasia Draga | | Date of Receipt |
| Mailing Address 115 Malba Dr | | 05 15 2013 _ |
| City | State Zip Code | Transaction ID : BEA5317F-2191-4D88-A |
| Malba | NY 11357 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 365.00 |
| Name of Employer | Occupation | 7 |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 365.00 | |
| Full Name (Last, First, Middle Initial) C. Robert Dundervill | | Date of Receipt |
| Mailing Address PO Box 3970 | | 05 28 2013 |
| City | State Zip Code | Transaction ID : D4094E41-C726-4662-B |
| Charleston | WV 25339-3970 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | \dashv |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
| SUBTOTAL of Receipts This Page (optional | al) | 2365.00 |
| . 5 (1 | · · · · · · · · · · · · · · · · · · · | |
| TOTAL This Period (last page this line num | nber only) | |

| | FOF | R LINE | NU | IMBER | : | PAGE | • | 10 OI | F | 34 |
|--|------|----------|----|-------|---|------|---|-------|---|-----|
| Use separate schedule(s) | (che | eck only | or | ne) | | | | | | |
| for each category of the Detailed Summary Page | X | 11a | | 11b | | 11c | | 12 | | |
| | | 13 | | 14 | | 15 | | 16 | | 717 |

| | tatements may not be sold or used by any perso name and address of any political committee to | |
|--|--|--|
| NAME OF COMMITTEE (In Full) | and the second s | 22 27 22 22 22 22 22 22 22 22 22 22 22 2 |
| | nology Inc Political Committee (OF | PHTHPAC) |
| / | | |
| Full Name (Last, First, Middle Initial) A. Michael Elman | | Date of Receipt |
| Mailing Address Ste 310 | | M - M / D - D / Y - Y - Y |
| 9114 Philadelphia Rd | | 05 01 2013 |
| City | State Zip Code | Transaction ID: 2E5020CC-277C-4B09-8 |
| Baltimore | MD 21237-4350 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.42 |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | gg. ogato Total to Date 🔻 | |
| Other (specify) ▼ | 1152.10 | |
| | | |
| Full Name (Last, First, Middle Initial) Stan Feil | | Date of Receipt |
| Mailing Address Ste A | | M = M / D = D / Y = Y = Y |
| 112 N Akers St | 000 | 05 01 2013 |
| City | State Zip Code | Transaction ID: 00D7BA0C-C966-4226-B |
| Visalia | CA 93291-5121 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 41.67 |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 208.35 | |
| Full Name (Last, First, Middle Initial) John Hagan | | Date of Receipt |
| Mailing Address 9401 N Oak Trfy Ste 200 | | 05 15 2013 |
| City | State Zip Code | Transaction ID : 7F418EB0-7B18-4988-9 |
| Kansas City | MO 64155-3393 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 83.33 |
| Name of Employer | Occupation | |
| Self | Ophthalmologist | |
| Receipt For: | | |
| Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 249.99 | |
| SUBTOTAL of Receipts This Page (optional) | | 155.42 |
| | | |
| TOTAL This Period (last page this line number | only) | |

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) John Hinrichsen Date of Receipt Mailing Address 10200 Westwind Dr 2013 02 City State Zip Code Transaction ID: 08808D92-27A5-4A3C-8 Shreveport LA 71106-8230 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David Hunt Date of Receipt Mailing Address Ste 301 331 Laidley St 17 05 2013 City State Zip Code Transaction ID: C76DC8BD-4179-4FCA-A WV Charleston 25301-1605 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Hunter Date of Receipt Mailing Address 300 Longwood Ave 15 2013 City Zip Code State Transaction ID: 1358B0A0-3035-4A69-B MA **Boston** 02115-5724 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) 1406.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Jeffrey Ward Kalenak Date of Receipt Mailing Address 2600 N Mayfair Rd Ste 600 20 2013 City Zip Code State Transaction ID: 899848FD-2F53-4E03-8 WI Milwaukee 53226-1374 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Martin Kaplan Date of Receipt Mailing Address Southdale Eye Clinic 6533 Drew Ave S 20 05 2013 City State Zip Code Transaction ID: FF4E93DE-E0D8-4660-9 MN Edina 55435 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Judith Kirby Date of Receipt Mailing Address 4209 Bordeaux Ave 05 15 2013 City Zip Code State Transaction ID: 308B2D87-E3D4-48FA-9 TX **Dallas** 75205 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼

| SUBTOTAL of Receipts This Page (optional) | _ | _ | 7 | _ | _ | 7 | _ | 9 | 18.33 | 3 | |
|---|---|---|---|---|---|---|---|---|-------|---|--|
| TOTAL This Period (last page this line number only) | | _ | 7 | _ | _ | 7 | _ | | | | |

249.99

Primary

Other (specify)

General

FOR LINE NUMBER: PAGE 13 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Dennis Kontra Date of Receipt Mailing Address 5802 Washington Ave Ste 102 06 2013 City Zip Code State Transaction ID: B4B3CE76-3C08-4EF2-A WI Racine 53406-4050 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Pete Lagouros Date of Receipt Mailing Address 8921 N Wood Sage Rd 05 15 2013 City State Zip Code Transaction ID: 1B29405F-43B2-40F1-9 IL Peoria 61615-7822 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Wayne Larrison Date of Receipt Mailing Address 46 Prince St Ste 203 30 2013 City State Zip Code Transaction ID: 14DB987F-CBBA-495D-8 CT New Haven 06519-1600 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Russell Leboyer Date of Receipt Mailing Address 9630 N. Kenton Ave 07 2013 City State Zip Code Transaction ID: 3A985823-11E9-4B11-9 Skokie IL 60076-1231 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jay Harris Levy Date of Receipt Mailing Address 184 NE 168th St 05 10 2013 City State Zip Code Transaction ID: 4070A26D1B7B6359A12B FL North Miami Beach 33162-3412 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) c. Benjamin Mason Date of Receipt Mailing Address 1110 Eagle Ridge Rd 15 2013 City State Zip Code Transaction ID: E106A387-2523-43AA-8 IA Cedar Falls 50613-1514 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) 490.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| Detailed Summary Page | | X | 11a | | 11b | | 11c | 12 | | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Raj Maturi Date of Receipt Mailing Address 200 W 103rd St Ste 1060 2013 City State Zip Code Transaction ID: 4C0E9F8611A2A52C8560 Indianapolis IN 46290-1001 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) B. Gary Mehlhorn Date of Receipt Mailing Address 1135 E Lakewood St Ste 104 20 05 2013 City State Zip Code Transaction ID: 43CE915C442B3DF3FE88 MO Springfield 65810-2403 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Melendez Date of Receipt Mailing Address 735 Grey Hawk Dr NE 01 2013 City Zip Code State Transaction ID: 877C2AC5-8D2E-4960-8 NM Rio Rancho 87144-4709 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) 208.35

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FOR LINE NUMBER: PAGE 16 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Robert Melendez Date of Receipt Mailing Address 735 Grey Hawk Dr NE 2013 31 City Zip Code State Transaction ID: FDCCBDA5-EB4C-440B-9 NM Rio Rancho 87144-4709 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Edward Edward Migliori Date of Receipt Mailing Address 120 Dudley St Ste 301 05 01 2013 City State Zip Code Transaction ID: 638FCCA1-8935-457F-9 Providence RΙ 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.66 Other (specify) Full Name (Last, First, Middle Initial) c. Amalia Miranda Date of Receipt Mailing Address Bldg A # 700 01 2013 3435 NW 56th St City Zip Code State Transaction ID: 05261BBC-F9AE-4047-A OK Oklahoma City 73112-4442 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 798.32 Other (specify) 208.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | Statements may not be sold or used by any personne name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) American Academy of Ophtha | Imology Inc Political Committee (C | PHTHPAC) |
| Full Name (Last, First, Middle Initial) Paul Moyer Mailing Address 520 Bruton Cir | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Kettering FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: □ Primary □ General □ Other (specify) ▼ | State Zip Code OH 45429-1624 C Occupation Ophthalmologist Aggregate Year-to-Date ▼ 500.00 | Transaction ID : 7F35E949-BBA5-41B6-9 Amount of Each Receipt this Period 500.00 |
| Full Name (Last, First, Middle Initial) Scott Murphy Mailing Address 5202 Faraon St City St Joseph FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code MO 64501 C Occupation Ophthalmologist Aggregate Year-to-Date ▼ 500.00 | Date of Receipt 05 |
| Full Name (Last, First, Middle Initial) Sok Nam Mailing Address 4278 W 3rd St City Los Angeles FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) | State Zip Code CA 90020-3449 C Occupation Ophthalmologist Aggregate Year-to-Date ▼ 249.99 | Date of Receipt M M |
| SUBTOTAL of Receipts This Page (optional) | ···· | 1083.33 |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Brenda Pagan-Duran Date of Receipt Mailing Address 45 Twin Brooks Rd 01 2013 City Zip Code State Transaction ID: 690D5252-5EE4-42EB-8 Saddle River NJ 07458-3322 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Julie Perry Date of Receipt Mailing Address Ste 200 999 Adams St 05 01 2013 City State Zip Code Transaction ID: CA9A862F-C79B-488F-B CA St Helena 94574-1171 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name (Last, First, Middle Initial) Mark Peters Date of Receipt Mailing Address Ste 100 06 2013 2525 NW Lovejoy St City Zip Code State Transaction ID: 12FA94EF-2360-4404-8 OR Portland 97210-2861 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 906.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Lawrence Piazza Date of Receipt Mailing Address PO Box 1539 01 2013 City Zip Code State Transaction ID: F947A51C-C1FC-4E13-B ME Blue Hill 04614-1539 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.33 Other (specify) Full Name (Last, First, Middle Initial) B. Dustin Pomerleau Date of Receipt Mailing Address 195 Fore River Pkwy Ste 480 05 15 2013 City State Zip Code Transaction ID: 2222BF8E-8562-4A5C-B Portland ME 04102-2787 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) Jonathan Primack Date of Receipt Mailing Address 4 Bobolink Dr 02 05 2013 City Zip Code State Transaction ID: 5579BBBB-EF9C-4ED1-8 PΑ Wyomissing 19610-2806 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 523.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | | | |

| | Statements may not be sold or used by any personance name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) American Academy of Ophthal | mology Inc Political Committee (O | PHTHPAC) |
| Full Name (Last, First, Middle Initial) Mary Gina Ratchford Mailing Address 67 Balfour Dr | | Date of Receipt |
| City West Hartford FEC ID number of contributing | State Zip Code CT 06117-2936 | 05 06 2013 Transaction ID: D579EC23-64E8-42A3-8 Amount of Each Receipt this Period 365.00 |
| federal political committee. Name of Employer Self Receipt For: □ Primary □ General □ Other (specify) ▼ | Occupation Ophthalmologist Aggregate Year-to-Date ▼ 365.00 | |
| Full Name (Last, First, Middle Initial) Lawrence Ronning Mailing Address 6046 Whipple Avenue | Otata Zin Oada | Date of Receipt 05 13 2013 |
| City North Canton FEC ID number of contributing federal political committee. | State Zip Code OH 44720 | Transaction ID : A925962B-A39F-4469-9 Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Ophthalmologist Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) David Shulman Mailing Address Ste 127 999 E Basse Rd City San Antonio FEC ID number of contributing federal political committee. Name of Employer | State Zip Code TX 78209-1802 C Occupation | Date of Receipt M |
| Self Receipt For: Primary General Other (specify) ▼ | Ophthalmologist Aggregate Year-to-Date ▼ 416.66 | |
| SUBTOTAL of Receipts This Page (optional) | > | 698.33 |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Roger Steinert Date of Receipt Mailing Address 118 I 2013 City Zip Code State Transaction ID: 4D87B0B2A19A1E7F1921 CA Irvine 92697-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) B. Cameron Stone Date of Receipt Mailing Address 21 Medical Park Dr 05 15 2013 City State Zip Code Transaction ID: ABEC99E2-BAD6-4C14-B NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 208.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Joseph Walsh Date of Receipt Mailing Address NY Eye & Ear Infirmary 80 310 E 14th St 2013 City State Zip Code Transaction ID: 929E7414-893B-4660-9 NY New York 10003 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 541.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Barry Welch Date of Receipt Mailing Address 424 Yellowstone Ave Ste 110 2013 City Zip Code State Transaction ID: 4FB087816A8201E9FAD7 WY Cody 82414-9309 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) B. Amy Wexler Date of Receipt Mailing Address 509 S Lenola Rd Ste 11 05 06 2013 City State Zip Code Transaction ID: 6E2730A0-C966-409B-A NJ Lenola 08057 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) Maynard Wheeler Date of Receipt Mailing Address 827 Covered Bridge Lane 80 2013 PO Box 538 City Zip Code State Transaction ID: F6FCC8FE-9D56-4A19-A NH Grantham 03753-0538 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 730.00 Other (specify) 813.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 23 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Jeffrey Whitman Date of Receipt Mailing Address Ste 400 2801 Lemmon Ave 2013 City Zip Code State Transaction ID: 3B20AE6C-898E-481C-B Dallas TX 75204-2399 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.65 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen Wilmarth Date of Receipt Mailing Address 1830 Sierra Gardens Ste 100 05 01 2013 City State Zip Code Transaction ID: FBA5E28C-30BB-4393-B CA Roseville 95661 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Wing Date of Receipt Mailing Address Ste 340 23 2013 1551 Renaissance Towne Dr City Zip Code State Transaction ID: E85BF45D-F9A7-44A0-9 UT Bountiful 84010-7670 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 883.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Jeremy Wolfe Date of Receipt Mailing Address 3535 W 13 Mile Rd Ste 344 01 2013 City State Zip Code Transaction ID: F3FD617725CD4A11AA08 Royal Oak MI 48073-6770 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 458.35 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremy Wolfe Date of Receipt Mailing Address 3535 W 13 Mile Rd Ste 344 05 21 2013 City State Zip Code Transaction ID: 4696827F27798CA7A2C4 MI Royal Oak 48073-6770 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 458.35 Other (specify) Full Name (Last, First, Middle Initial) c. Rumei Yuan Date of Receipt Mailing Address 6A Bluebird Ln 13 2013 City Zip Code State Transaction ID: 916437DA-629D-4EC3-9 NY Huntington 11743-6502 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 666.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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34 Use separate schedule(s) for each category of the **Detailed Summary Page** 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Charles Zacks Date of Receipt Mailing Address FI 2 15 Lowell St 04 2013 City Zip Code State Transaction ID: 5C94FE78-CDCD-4D3D-B ME Portland 04102 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... 18797.11 TOTAL This Period (last page this line number only).....

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| | or used by any person for the purpose of soliciting contributions political committee to solicit contributions from such committee. |
| | Committee (OPHTHPAC) |
| State Zip Code MT 59624 C C00328211 Occupation Aggregate Year-to-Date | Amount of Each Receipt this Period 1000.00 Returned funds |
| State Zip Code IN 46176 C C00460667 Occupation Aggregate Year-to-Date | Amount of Each Receipt this Period 2500.00 Returned funds |
| State Zip Code C Occupation | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 1 | State Zip Code MT 59624 C C00328211 Occupation State Zip Code IN 46176 C C00460667 Occupation Aggregate Year-to-Date |

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| for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) A. Wells Fargo Bank N.A. Mailing Address PO Box 63020 City State Zip Code San Francisco CA 94163 Purpose of Disbursement AMEX charges - May 2013 Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Wells Fargo Bank N.A. Mailing Address PO Box 63020 Transaction ID : 086D02E18E5013376DC Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Transaction ID : 98D7E838B920575FA91 Amount of Each Disbursement this Period Category/ Type Transaction ID : 98D7E838B920575FA91 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Primary General President Primary General President Disbursement Tor: Senate Primary General Disbursement For: Senate Primary General President Disbursement For: Senate Primary General Disbursement For: Senate President For: Senate Primary General Disbursement Fo | SCHEDULE B (FEC Form 3X) | Harris I I I I I I I I I I I I I I I I I I I | FOR LINE | NUMBER: | PAGE 27 OF 34 | |
|--|---|---|-------------|--|------------------------|--|
| Detailed Summary Page 27 | ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | · — · — — — — — | | |
| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In PUI) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) A. Wells Fargo Bank N.A. Mailing Address PO Box 63020 City State Zip Code Candidate Name Category/ Type Office Sought: House Pensatent Other (specify) ▼ State: Disbursement For: Full Name (Last, First, Middle Initial) B. Wells Fargo Bank N.A. Mailing Address PO Box 63020 City State Zip Code Senate Primary General Other (specify) ▼ State Zip Code CA 94163 Transaction ID: 98502E18E6013378DC Amount of Each Disbursement this Period Category/ Type Transaction ID: 98502E18E6013378DC Amount of Each Disbursement Type Date of Disbursement State: Dishorts Full Name (Last, First, Middle Initial) C. City State Zip Code Purpose of Disbursement State: Dishorts Full Name (Last, First, Middle Initial) C. City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: Dishorts Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement This Page (optional) | | | | | | |
| or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pittil) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) A. Wells Fargo Bank N.A. Mailing Address PO Box 63020 City State Zip Code CA 9-4163 Purpose of Disbursement AMEX charges May 2013 Cardidate Name Office Sought: House Primary General Primary | Any information copied from such Reports and States | mente may not be cold or us | | | | |
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| A. Andy Harris for Congress | | | Date of Disbursement |
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| Bel Air | MD 21014 | | 1141134611011 ID . 46760DU02F20F0F0F19 |
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| Full Name (Last, First, Middle Initial) A. David Scott for Congress | | | Date of Disbursement |
| Mailing Address PO Box 960821 | | | 05 09 2013 |
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| ٠. | Levin for Congress | | | | M M / D | | | |
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| | State: MI District: 09 | caner (openity) | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| C. | Lincoln PAC | | | | Date of Disburse | | | |
| | Mailing Address PO Box A3968 | | | | 05 Z | 29 2013 | | |
| | | | | | | | | |
| | • | State Zip Code |) | | Transaction ID |): F0D93117493068B7129 | | |
| | Chicago Purpose of Disbursement | IL 60690 | | | | | | |
| | 2013 Contribution | | | 011 | Amount of Each | Disbursement this Period | | |
| | Candidate Name | | | Category/ | | 1000.00 | | |
| | Lincoln PAC Office Sought: House Disbursen | and Fam. 2012 | | Туре | | 1000.00 | | |
| | Office Sought: House Disbursen Senate | nent For: 2013 Primary Gen | neral | | | | | |
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| SCHEDULE B (FEC Form 3X) | Lico conorato achadula(a) | FOR LINE | |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b 27 | one) 22 X 23 24 25 26 28a 28b 28c 29 30b |
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| NAME OF COMMITTEE (In Full) | | | |
| American Academy of Ophthalmol | ogy Inc Political Con | nmittee (Ol | PHTHPAC) |
| Full Name (Last, First, Middle Initial) | | | |
| A. Lone Star Leadership PAC | | | Date of Disbursement |
| Mailing Address PO Box 30844 | | | 05 09 2013 |
| , | State Zip Code | | Transaction ID: 2EBECD9CD4F1E23168E |
| Bethesda | MD 20824 | | |
| Purpose of Disbursement 2013 Contribution | | 011 | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 2500.00 |
| Lone Star Leadership PAC | | Туре | 1000.00 |
| Office Sought: House Disburser Senate President | ment For: 2013 Primary General Other (specify) ▼ | | |
| State: District: | Contribution | | |
| Full Name (Last, First, Middle Initial) | | | |
| B. Luke Messer for Congress | | | Date of Disbursement |
| Mailing Address PO Box 917 | | | 05 29 2013 |
| Shelbyville | State Zip Code IN 46176 | | Transaction ID: 7637B14C00A9C9DC5C1 |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 2500.00 |
| Allan Lucas Messer | | Type | 2500.00 |
| | ment For: 2014 Primary General Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) C. McConnell Senate Committee '14 | | | Date of Disbursement |
| Mailing Address PO Box 1496 | | | 05 09 2013 |
| City Louisville | State Zip Code KY 40201 | | Transaction ID : BA23520F1D350DC7026 |
| Purpose of Disbursement | 10201 | | |
| 2014 Primary Candidate Name | | 011 | Amount of Each Disbursement this Period |
| Mitch McConnell | | Category/ Type | 2500.00 |
| Office Sought: House Senate President Disburse | nent For: 2014 Primary General Other (specify) | Туро | |
| State: KY District: | | | |
| SUBTOTAL of Disbursements This Page (optional) | | ····· | 7500.00 |
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| NAME OF COMMITTEE (In Full) American Academy of Ophthalm | ology Inc Political Co | mmittee (OF | PHTHPAC) | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Bishamana at | | | | | | | | |
| A. Michaud for Congress | Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement | | | | | | | | | | |
| Mailing Address 213 Lisbon St | | | | | | | | | | | |
| City | Transaction ID : 938C2050E6F87DC1544 | | | | | | | | | | |
| Lewiston Purpose of Disbursement | ME 04240 | | - | | | | | | | | |
| 2014 Primary | | 011 | Amount of Each Disbursement this Period | | | | | | | | |
| Candidate Name | | Category/ | 1000.00 | | | | | | | | |
| Michael H. Michaud | | Туре | 1000.00 | | | | | | | | |
| Senate President | sement For: 2014 ✓ Primary General Other (specify) ▼ | | | | | | | | | | |
| State: ME District: 02 | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. Renee Ellmers for Congress Con | | Date of Disbursement | | | | | | | | | |
| Mailing Address PO Box 99567 | | | 05 29 2013 | | | | | | | | |
| City Raleigh Purpose of Disbursement | State Zip Code NC 27624 | | Transaction ID: 516D2A5C600C955D7A3 | | | | | | | | |
| 2014 Primary | | 011 | Amount of Each Disbursement this Period | | | | | | | | |
| Candidate Name | | Category/ | 1000.00 | | | | | | | | |
| Renee Jacisin Ellmers | | Type | 1000.00 | | | | | | | | |
| Office Sought: House Disbur | sement For: 2014 ✓ Primary General Other (specify) ▼ | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. Searchlight Leadership Fund | Date of Disbursement | | | | | | | | | | |
| Mailing Address 700 13th Street NW Suite 600 | | 05 29 7 2013 | | | | | | | | | |
| City Washington | State Zip Code DC 20005 | | Transaction ID: 301104F80B7B7B2CBF8 | | | | | | | | |
| Purpose of Disbursement 2013 Contribution | | 011 | Amount of Each Disbursement this Period | | | | | | | | |
| Candidate Name | Category/ | 5000.00 | | | | | | | | | |
| Searchlight Leadership Fund Office Sought: House Disbur | nament Fore 2012 | Туре | 3 | | | | | | | | |
| Senate President State: District: | sement For: 2013 Primary General Other (specify) ▼ Contribution | | | | | | | | | | |
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| NAME OF COMMITTEE (In Full) American Academy of Ophthalmolo | ogy Inc Political Con | nmittee (OF | PHTHPAC) | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | | | | |
| A. Vern Buchanan for Congress Mailing Address PO Box 48928 | | | Date of Disbursement O5 09 2013 | | | | | | | |
| | | | | | | | | | | |
| Sarasota | State Zip Code FL 34230 | | Transaction ID: 1FEAA2534B2E56D608E | | | | | | | |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | | | | | | | |
| Candidate Name Vernon Buchanan | | Category/ Type | 5000.00 | | | | | | | |
| Office Sought: House Disburser | nent For: 2014 Primary | 71 | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. Wyden for Senate | | Date of Disbursement | | | | | | | | |
| Mailing Address 232 NE 9th Avenue | | | 05 29 2013 | | | | | | | |
| Portland | State Zip Code OR 97232 | | Transaction ID : 529B4ED49C89A721611 | | | | | | | |
| Purpose of Disbursement 2016 Primary | | 011 | Amount of Each Disbursement this Period | | | | | | | |
| Candidate Name Ron Wyden | | Category/ Type | 1000.00 | | | | | | | |
| Senate X | nent For: 2016 Primary General Other (specify) | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. Wyden for Senate | Date of Disbursement | | | | | | | | | |
| Mailing Address 232 NE 9th Avenue | 05 29 2013 | | | | | | | | | |
| · · | State Zip Code OR 97232 | | Transaction ID : 8DD02866E2437022E24 | | | | | | | |
| Purpose of Disbursement 2016 General | | 011 | Amount of Each Disbursement this Period | | | | | | | |
| Candidate Name Ron Wyden | | Category/ Type | 1000.00 | | | | | | | |
| Senate | nent For: 2016 Primary | | | | | | | | | |
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| | NAME OF COMMITTEE (In Full) | | 71 | | | | | | | | | | | | |
| $ \rangle$ | American Academy of Ophthalmolo | ogy Inc I | Political Co | mmi | ittee | e (O | PHTHI | PAC | C) | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | | |
| Α. | Charles Barr | | | | | | Date of Disbursement | | | | | | | | |
| | Mailing Address 301 E Muhammad Ali Blvd | | | | | | 05 | | 21 | | L | 2013 | | | |
| | , | State | Zip Code | | | | Tran | sacti | on ID | : 811 | 14FDFF | BBAF8F | -80B | C98 | |
| | Louisville Purpose of Disbursement | KY | 40202-1511 | | | | | | | | | | | | |
| | Refund of duplicate April contribution received 010 | | | | | | Amount of Each Disbursement this Period | | | | | | | | |
| | Candidate Name | | Category/ Type | | | | | 1000.00 | | | | | | | |
| | Office Sought: House Disbursen Senate | nent For: Primary | General | | | | | | | | | | | | |
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| | State: District: | | | | | | | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | | |
| В. | Eugene Gullingsrud | | | | | | Date o | of Dis | | | | | | | |
| | Mailing Address 7450 France Ave S Ste 100 | | | | | | 05 | / | 02 | | / Y | 2013 | Y | | |
| | City | Stata | Zip Code | | | | | | | | | | | | |
| | , | State MN | 55435-4799 | | | | Tran | sacti | ion ID | : 3EI | BA97A | 35D25 | \2E0 | A9B | |
| | Purpose of Disbursement | | | | - | | | | | | | | | | |
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| | Candidate Name | | Category/ Type | | | | | | , | , | 50 | 0.00 | | | |
| | Office Sought: House Disbursen | nent For: | | | | | | | | | | | | | |
| | | Primary | General | | | | | | | | | | | | |
| | President State: District: | Other (spec | city) 🔻 | | | | | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | | |
| C. | John Sutphin | | | | | | Date of | of Dis | sbursei | ment | | | | | |
| | Mailing Address 9310 State Line Rd | | | | | | 05 | / | 02 | _ | | 2013 | Y | | |
| | City | State | Zip Code | | | | _ | | | | | | | | |
| | | KS | 66206-1924 | | | | Tran | sacti | ion ID | : A0 | 3A386I | D0C00E | BA9A | ،73F | |
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